

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/612,864
		Filing Date	July 2, 2003
		First Named Inventor	Alok Tripathi
		Art Unit	2611
		Examiner Name	Anna Y. Ziskind
Total Number of Pages in This Submission		Attorney Docket Number	
		42P16617	

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
<input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA	Remarks <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Vincent H. Anderson, Reg. No. 54,962 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	/Vincent H. Anderson/
Date	August 21, 2007

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being submitted electronically via EFS Web on the date shown below

Typed or printed name	Julie Dussault
Signature	
Date	August 21, 2007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of:

Alok Tripathi, et al.

Serial No.: 10/612,864 Group Art Unit: 2611

Filed: July 2, 2003 Examiner: Anna Y. Ziskind

FOR: APPARATUS, SYSTEM AND METHOD FOR RECEIVER
EQUALIZATION

AMENDMENT AND RESPONSE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the final Office Action mailed February 21, 2007, the three month period during which to respond thereto being extended three months by a request for a three month extension of time submitted herewith, please amend the above-identified application as follows.

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 8 of this paper.